

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

200 W. Washington, Suite 301
Indianapolis, IN 46204
(317) 233-0696
<http://www.in.gov/legislative>

FISCAL IMPACT STATEMENT

LS 7120

BILL NUMBER: HB 1548

NOTE PREPARED: Feb 17, 2015

BILL AMENDED: Feb 16, 2015

SUBJECT: Midwives.

FIRST AUTHOR: Rep. Lehe

FIRST SPONSOR:

BILL STATUS: CR Adopted - 1st House

FUNDS AFFECTED: X **GENERAL**
DEDICATED
FEDERAL

IMPACT: State

Summary of Legislation: (Amended) *Removal of Collaboration Agreements*- The bill removes the requirement that a direct entry midwife (midwife) have a collaborative agreement with a physician requiring that the midwife's client have a consulting physician. The bill requires that a client to be examined by a physician at certain times during the pregnancy unless the client refuses and meets certain conditions.

Date Extensions- The bill extends the date: (1) by which a midwife is required to submit certain information to obtain an exemption from certain certification requirements; (2) relating to restrictions of use of the title "certified direct entry midwife"; and (3) after which practicing midwifery without a certificate is a felony.

Disclosures, Providing Records, & Repeal- The bill requires certain information to be included in a midwife's disclosure form, client's records, and emergency plan. It requires a client's medical records that are prepared by the clients physician be provided to the midwife. The bill repeals certain provisions concerning physician collaboration.

Effective Date: (Amended) Upon passage, July 1, 2015.

Explanation of State Expenditures: (Revised) *Removal of Collaboration Agreements*- This provision would reduce the future administrative workload of the Professional Licensing Agency (PLA) and the Medical Licensing Board (MLB), as the bill would remove the annual registration requirements on physicians wishing to participate as collaborating physicians. The PLA's workload would be further reduced if certified direct entry (CDE) midwives did not have to report a change in collaborating physicians.

However, given the rules for certification of CDE midwives have not yet been adopted by the MLB and no

registration is in place, this provision presently has no real impact to PLA expenditures or workload.

(Revised) State Department of Health- The State Department of Health (SDOH) would be required to prepare a booklet describing the potential consequences of not receiving prenatal examinations with a physician for CDE midwives to provide to their clients that do not have a physician at the time of the first appointment with the midwife. It is likely the SDOH could prepare the booklet within their existing level of resources. Providing CDE midwives with paper copies, if required to do so, would increase the overall expenditure.

Date Extensions- Similarly, this provision would extend deadlines prior to when CDE midwife information, use of title, and felony violations would take effect. Again, given that no CDE midwives have currently been certified, there would be no impact on state expenditures related to the extension granted by the bill.

Additional Information- Typically, the Medical Licensing Board meets 11 times per calendar year regardless of midwifery matters. The Midwifery Committee has met about 4 or 5 times since its inception.

Explanation of State Revenues: *Date Extensions-* The proposed extension of an additional year prior to certification should have no impact on state revenues, given fees for certification have not yet been established.

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: Professional Licensing Agency, Midwifery Committee, Medical Licensing Board, State Department of Health.

Local Agencies Affected:

Information Sources: Benjamin Evans, former Legislative Liaison with Professional Licensing Agency.

Fiscal Analyst: Chris Baker, 317-232-9851.